CJA 20 APPOINTMENT OF AND AUTHORITY TO PAY COURT APPOINTED COUNSEL												
1. CIR./DIST./DIV. CODE 2. PERSON REPRESENTED PUNZALAN, NATHANIEL D					ΑZ	VOUCHER NUMBER						
3. MAG. DKT/DEF. NUMBER			4. DIST. DKT/DEF. NUMB 1:07-000075-001		ER	5. APP	EALS D	DKT/DEF. NUMBER		6. OTHER DKT, NUMBER		
7. IN CASE/MATTER OF (Case Name) 8. PAYMENT CATED U.S. v. PUNZALAN Felony				CATEGORY			9. TYPE PERSON REPRES Adult Defendant		SENTED	10. REPRESEN (See Instruction Criminal (CATION TYPE Case
11.	offense(s) charged 1) 18 922G.F UN	(Cite U.S. Code, LAWFUL TI	ne offen RM	offense, list (up to five) major offenses charged, according to severity of offense. MS, ETC.								
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS MANTANONA, RAWLEN M. CABOT MANTANONA LLP EDGE BUILDING, 2ND FLOOR 929 SOUTH MARINE CORPS DRIVE TAMUNING GU 96913 Telephone Number: (671) 646-2001 14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide per instruction CABOT MANTANONA LLP BANKPACIFIC BUILDING, 2ND FLR 825 SOUTH MARINE CORPS DRIVE TAMUNING GU 96913					dons)	13. COURT ORDER O Appointing Counsel F Subs For Federal Defender R Subs For Retained Attorney Y Standby Counsel Prior Attorney's Name: Appointment Date: 11/30/2007 Because the above-named person represented has testified under oath or has otherwise swifified this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justices or equire, the attorney whose name appears in light (1) is appointed to represent this person is this case, or the country of the countr						
	CATEGORIES (Attach itemization of services with dates)	HO CLAI		TOTAL AMOUNT CLAIMED		MATH/TECH ADJUSTED HOURS	MATH/TECH ADJUSTED AMOUNT		ADDITIONAL REVIEW
15.	a. Arraignment and					,						
	b. Bail and Detention Hearings											5.50 mg & 8.50
	c. Motion Hearings											is a
I n	d. Trial											
C	e. Sentencing Hearli	e. Sentencing Hearings										d v
o u	f. Revocation Hearin	f. Revocation Hearings										O was in
r	g. Appeals Court	g. Appeals Court										, to the second
'	h. Other (Specify on additional sheets)											1 1
	(Rate per hour = \$100.00) TOTALS:											
16.	a. Interviews and Conferences											
õ	b. Obtaining and reviewing records											
t	c. Legal research and brief writing											
f		d. Travel time										
C o u		c. Investigative and Other work (Specify on additional sheets)										
Ï	100.00											
				OTALS:								
17. 18.	<u> </u>		, meals, mileage, o	· ·								
10.	Other Expenses	(otner than expe	t, transcripts, etc.	.)								
19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE FROM TO					VICE			PPOINTMENT TERMINATION DATE FOTHER THAN CASE COMPLETION 21. CASE DISPOSE				SE DISPOSITION
22. CLAIM STATUS Final Payment Interior Payment Number Supplemental Payment Have you previously applied to the court for compensation and/or reminishursement for this case? YES NO If yes, were you paid? YES NO Other than from the court, have you, or to your knowledge has suppose else, received payment (compensation or anything or value) from any other source in connection with this representation? YES NO If yes, give details on additional sheets. I swear or affirm the truth or correctness of the above statements.												
Signature of Attorney: Date:												
23.	COURT COMP. 24. OUT OF COURT COMP. 25. TRAVEL					KPENSES	8	26. OTHER EXPENSES			27. TOTAL AMT. APPR / CERT	
28.	SIGNATURE OF THE PRESIDING JUDICIAL OFFICER						DATE 28a JUDG			28a. JUDGE	/ MAG. JUDGE CODE	
29.	IN COURT COMP.	COURT COMP. 30. OUT OF COURT COMP. 31. TRAVEL E					3	32. OTHER EXPENSES 33. TOTAL			33. TOTAL	AMT. APPROVED
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved in excess of the statutory threshold amount.								DATE 34a. JUDGE COD				GE CODE